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ABSTRACT

This guide is designed to help teachers develop and implement HIV/AIDS education programs for students with special education needs. It presents specific suggestions for adapting curricula and teaching styles to meet the needs of individual students. The introduction discusses why students with special needs should receive HIV/AIDS education and what barriers to that education exist. It notes the elements necessary for quality HIV/AIDS education for students with special needs. The second component provides ideas for adapting instructions for students with special needs (e.g., determining the appropriate program, using a multisensory approach, and using task analysis). It includes adaptation strategies, a quick reference, and an HIV/AIDS checklist. The third component offers teaching activities with suggestions for adaptations to accommodate students with specific disabilities (e.g., learning disabilities, mental retardation, emotional disturbance, and visual impairment). The fourth component offers a list of references and resources on HIV/AIDS education for students with special needs. (SM)

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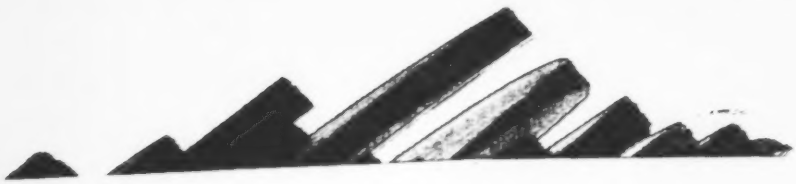

HIV/AIDS Education For Students With Special Needs: A Guide For Teachers

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HIV/AIDS Education For Students With Special Needs: A Guide For Teachers

Association for the Advancement of Health Education (AAHE)

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Contents

Preface 1
Overview 1
Structure of this guide 1

PART 1: Introduction 3
Why HIV/AIDS education for students with special needs? 3
Barriers to HIV/AIDS education for students with special needs 3
Premises of quality HIV/AIDS education for students with special needs 4

PART 2: Adapting Teaching Activities for Students With Special Needs 5
Determining the appropriate program 5
Adjusting to the learning pace of the student 5
Establishing an accepting attitude among teachers and students 6
Maintaining the attention of students with special needs 6
Using a multisensory approach 6
Using task analysis 6
Technology for students with special needs 9
Developing social skills for students with special needs 9
Simplifying material 9
Other general strategies 9
Options for providing HIV/AIDS education to students with special needs 10
Adaptation Suggestions 11
General suggestions for all disabilities 11
Particular suggestions for students with... 11
Learning disabilities 11
Mental retardation 11
Emotional disturbance 11
Visual impairment 12
Hearing impairment 12
Physical impairment 12
HIV/AIDS Skill Checklist 13

PART 3: Sample Teaching Activities for Students With Special Needs 15
HIV/AIDS skills 16
Basic life skills 34

PART 4: Resources and References 43

Preface

Overview

The purpose of this guide is to assist teachers in developing and implementing HIV/AIDS education programs for students with special education needs. It presents specific suggestions for adapting curricula and teaching styles to meet the needs of individual students. The teaching activities included here address a range of skills related to the prevention of HIV/AIDS.

The Centers for Disease Control and Prevention (CDC) reports that "The HIV (Human Immunodeficiency Virus) that causes AIDS and other HIV-related diseases has precipitated an epidemic unprecedented in modern history" (Centers for Disease Control, 1988). AIDS (Acquired Immunodeficiency Syndrome) remains a life-threatening disease and a major health concern. Since the first cases were reported in the United States in 1981, the impact of AIDS on our society has been devastating. The Centers for Disease Control and Prevention has also released figures that underscore the impact of AIDS. By the end of 1993, 361,509 cases of AIDS had been diagnosed in the United States; 220,871 deaths had resulted from the disease, and 140,638 people in the United States are now living with AIDS.

Educators must recognize that students with special needs are, or will be, sexually active and thus are susceptible to contracting HIV infection. Without question these students should receive appropriate training and education in preventative behaviors to reduce their risk of contracting HIV.

Structure of this guide

This guide has three components.

The introduction discusses why students with special needs should receive HIV/AIDS education and what the barriers to that education are. It concludes with a discussion of the elements necessary for quality HIV/AIDS education for students with special needs.

The second component provides ideas for adapting instructions for students with special needs. It includes Adaptation Suggestions, a quick reference for suggestions for working with students with special needs, and an HIV/AIDS skill checklist, which can serve as a guide to the scope and sequence of HIV/AIDS information and skills. The HIV/AIDS Skill Checklist can also assist teachers in ascertaining student needs and selecting appropriate teaching activities.

The third component offers teaching activities with suggestions for adaptations.

The fourth and final component is a list of references and resources on HIV/AIDS education for students with special needs.

PART 1: Introduction

Why HIV/AIDS education for students with special needs?

All students with disabilities may not have adequate education in HIV/AIDS prevention, but the need for instructional programs is clear. In 1991 the Virginia Department of Education's Family Life Education Curriculum identified several areas of deficiency that illuminate the vulnerability of special education students to HIV infection and other sexually transmitted diseases. These include:

KNOWLEDGE. Students who need special education services often have less knowledge than other students about their bodies and their sexuality. In addition, these students are often more prone to myths and misinformation.

SOCIAL SKILLS. Students with disabilities may lack basic social skills or have limited opportunities for social development. This may result in the exhibition of improper behaviors, such as the inappropriate demonstration of affection or the inability to resist negative peer pressure. To develop appropriate social skills, activities should be constructed that address such areas as communication, refusal skills, and decision making.

JUDGMENT. Special education students may demonstrate poor judgment and poor impulse control related to decision making. Education needs to focus on the consequences of decision making.

SELF-ESTEEM. Students with special needs may have low self-esteem and consequently be more likely than other students to participate in risky behaviors in order to be accepted by their peers.

For students to receive quality HIV/AIDS instruction, a curriculum must exist that includes learning activities appropriate for individuals with special needs and provides suggestions for adapting activities for these students.

Barriers to HIV/AIDS education for students with special needs

Numerous organizations involved in education and health have validated the importance of HIV/AIDS education for children, adolescents, and teenagers (Council of Chief State School Officers, 1993; Lynch, 1991; Yarber, 1993). Unfortunately, students with special education needs are often not exposed to the same quality and quantity of health education and HIV/AIDS education as other students. This disparity exists for the following reasons:

- Students with special education needs who are included in mainstream health education classes may not receive health education in any other instructional situation.

- Those included in a health education classroom may not receive appropriate individualized instruction to maximize the impact of the classroom instruction. This can occur because the health educator may not be aware of the special instructional needs of students with disabilities or prepared to implement approaches that address them. Another contributing factor may be the lack of instructional support from the special educator, possibly due to the special educator's lack of background in health education content and teaching techniques.

- Key individuals, including school administrators, teachers, and parents, may not recognize the importance of HIV/AIDS education for students with special education needs and not include such instruction as part of Individualized Education Plans.

- Logistical considerations may complicate the scheduling of health education for students in special education programs. Students may not be able to include the mainstream health education class in their schedule, or health and special education teachers may not be able to find time to collaboratively plan and implement instructional programs.

Premises of quality HIV/AIDS education for students with special needs

Quality HIV/AIDS education curricula for learners with special needs are based on three premises:

The first is that health educators and special educators, working together, can enhance the quality of health education for students with special needs. Each professional brings his or her expertise to the team effort. The goal of this collaboration is for the health educator and the special educator to work in a coordinated fashion to jointly teach academically and behaviorally heterogeneous groups of students within the general classroom setting.

The second premise is that HIV/AIDS prevention education is most effectively accomplished when it is incorporated into a comprehensive school health education program. Comprehensive school health education is sequential, age-appropriate instruction in a variety of health content areas.

The third premise is that awareness of human diversity is a top priority in teaching HIV/AIDS education. Demographic data indicate that the student population in general is becoming significantly more diverse. To be successful, HIV/AIDS education must emphasize an inclusion approach. Health issues are different than other subject areas in that beliefs and values have a major impact on a student's ability to understand and identify positive health practices.

PART 2: Adapting Teaching Activities for Students With Special Needs

Determining the appropriate program

Adaptation of teaching activities is essential for meeting the needs of individual students. Some adaptations are simply good teaching techniques that benefit all students. Others are specific to a particular disability or individual. In adapting HIV/AIDS education curricula, the first step is to determine the essential information to be taught or skills to be developed. For many students with special needs, the appropriate lesson for them might not match the lessons for their age and grade as outlined in their school's health education curriculum. Essential information and skills for the HIV/AIDS component of the comprehensive school health education program might include (1) What is HIV? (2) How is it transmitted? and (3) How is it prevented?

Some students might need to start with the concept of disease; others might be ready to deal with HIV as one of several sexually transmitted diseases. What should be included in the program can be determined by assessing the students' prior knowledge, attitudes, and skills. For example, students with mental retardation may have factual knowledge about HIV and AIDS but may be socially unprepared to handle certain kinds of decisions. A program for these students would emphasize social skills, as well as information about prevention. Other students might understand that AIDS is a disease but not know how it is transmitted. A program for these students would emphasize how HIV is transmitted as well as how it is prevented.

While providing instruction in skill development, it is important to show students with special needs in a sequential manner how those skills are related. In HIV/AIDS prevention education, many prerequisite concepts lead up to instruction about HIV/AIDS. It will be up to each individual teacher, or preferably a team of teachers, to determine the appropriate implementation of the specific skills.

Adjusting to the learning pace of the student

The learner with special needs can usually be successful if given appropriate time to assimilate the information, complete assignments, build the foundation (prerequisite knowledge and skills) for each succeeding step, and practice appropriate skills. Students should be given an idea of the large goal, but the focus should be on the smaller steps it takes to get there.

Students with special needs might also need more time to review materials and formulate responses. They can be encouraged to practice skills and review materials, for example, with

flash cards during independent work periods, whenever the class has to wait in line, and brief 10-minute exercises for homework. In a large class, they can be given time to formulate responses by establishing a policy of waiting for many hands to be raised and acknowledging that many students had an appropriate response. Another approach to adapting the pace is to present basic concepts to the whole group and give supplemental instruction to those who need it in a small group facilitated by either the health educator or special educator.

Establishing an accepting attitude among teachers and students

Critical to implementing curriculum adaptations is establishing an attitude that acknowledges and accepts that all students learn in different ways. Students and teachers need to realize that "fair" is not always equal and identical. Consider, for example, students who cannot write legibly or quickly. They may be greatly assisted by using a word processor, having someone else write their work as it is dictated, or recording their work using a tape recorder. Students who have difficulty reading might need to listen to taped material or have someone read to them. This does not mean that these students are receiving an unfair advantage. Rather, they are simply using an alternate means of communication, often requiring even greater effort on their part than other students using traditional methods.

Maintaining the attention of students with special needs

It may be difficult to keep students with special needs focused on the material. There are a number of ways to address this problem. A regular change of activities—from listening to working with manipulatives to sharing in groups—can help. Students may be more successful at focusing if they both see and hear a plan of events for the lesson. During independent work time, a walkman or headphones can help block out distracting outside noises. Other ways to minimize distractions include placing the student in a quiet corner of the room or behind some visual barrier, such as a study carrel.

Using a multisensory approach

Students with special needs often learn better through a multisensory experience to be successful. This might mean combining lecture with graphic diagrams as well as models that can be manipulated. It might also mean that students verbalize material as they write it. For example, using 5 x 8 index cards as flashcards allows the students to both manipulate material and orally rehearse information.

Using task analysis

As mentioned above, some students are capable of a task but need an external structure to organize the requisite steps. Others may need prerequisite skills in order to successfully

accomplish the task. Task analysis is the process by which the teacher, when planning a lesson, breaks down a specific instructional task into small, logical, easy-to-understand steps. Each of the steps may then become the focal point of separate learning experiences. The following example is a task analysis for scheduling a medical appointment.

EXAMPLE: Making a Medical Appointment

Make a medical appointment							
Locate the number				Call the office and ask for an appointment			
Look up the phone number		Write the number down		Call the number		Ask for an appointment	
Locate the phone book	Use ABC order to locate number	Get paper and pencil	Write the name and number	Lift up the receiver	Dial the numbers in order	Introduce yourself	Tell the person when you want to see the doctor

Technology for students with special needs

Advances in technology have opened up a world of communication to students who were previously unable to express themselves. There are many types of equipment available that facilitate learning for students with special needs.

Students may have physical disabilities that impede their ability to communicate. These students may use a range of orthopedic equipment. Students with hearing impairments may use hearing aids. Interpreters can also help in teaching these students. Students with visual impairments may need personal enlargers for reading, slant-boards for reading and writing, or braille writers for writing. And certainly a personal computer is a valuable tool for all students.

Developing social skills for students with special needs

Many students with specific disabilities not only have academic needs but social needs as well. Guidance and training in social skills such as verbal and nonverbal communication and decision making should be critical components of HIV/AIDS prevention education. Teacher and peer modeling and skill practice through role playing are two useful techniques. Learning to understand and take responsibility for the consequences of one's behavior is critical to HIV/AIDS prevention. This issue is particularly pertinent to students with emotional disabilities, who are especially vulnerable.

Simplifying material

For students with mental retardation, language impairment, or severe learning disabilities, the material and vocabulary that are presented needs to be simplified and made as concrete as possible. Using graphics and models to accompany the simple text facilitates learning for these students. Providing word banks helps students who have difficulty retrieving specific words.

Other general strategies

Other general strategies for teaching students with special needs include:

MODELING. Students with special needs benefit from hearing and seeing what is expected by watching and listening to the teacher demonstrate.

REPEATING. Students with attention or auditory processing difficulties may need to hear a fellow student's question repeated in order to follow the lesson.

PREFERENTIAL SEATING. Students with attention, hearing, or vision problems benefit from sitting close to where the teacher will be speaking. Students with attention problems may need to sit in a place where visual and auditory stimuli are minimized.

VISUAL FOCUSING. Many students benefit from highlighting key words in the directions, color coding information for easier organization, and using a marker to stay focused when reading.

Options for providing HIV/AIDS education to students with special needs

HIV/AIDS education can be provided to students with special needs in several different formats. The decision as to where and how students with special needs should receive this information depends on the needs of the individual student. This decision should be made by a team that includes a special educator, a health educator, a regular classroom teacher, the parent, and, when appropriate, the student.

I. HIV Prevention Education in Learning Center/Learning Lab (Self-Contained Classroom)

Health educator/special educator/aide in self-contained classroom for HIV unit

Health educator released to special education classroom for HIV unit; substitute for health education classroom via special education funding

Health educator released to special education classroom for HIV unit; certified special education aide to health education classroom

II. HIV Prevention Education in the Health Education Classroom:

Integration of students with special needs/special educator/special education aide into health education classroom; three-way cooperative planning, implementation, and evaluation

Integration of students with mild disabilities into health education classroom; special educator indirectly collaborates with health educator on an ongoing basis; special educator/health educator cooperatively teach HIV unit

Integration of students with mild disabilities into health education classroom; special educator/health educator cooperatively teach one or more days per week year round

Special educator released to health education classroom; instructional aide sent to Learning Lab; special educator/health educator cooperatively teach HIV unit

HIV/AIDS education should be an important component of the education programs of all students, including those with special education needs. Ideally, HIV/AIDS instruction should be planned and developed collaboratively by health educators and special educators and included as part of a comprehensive school health education program. Such instruction, delivered in a manner sensitive to individual differences, will assist in the prevention of HIV/AIDS transmission for all individuals.

Adaptation Suggestions

General suggestions for all disabilities

Adjust the pace of the teaching
Adjust the amount of material taught
Simplify the material/vocabulary
Model the skill being taught
Use peer coaching/teaching
Use cooperative learning, with participation of all students
Preteach prerequisite skills and basic vocabulary
Reteach basic concepts
Review and practice
Use task analysis to break down difficult skills into simpler steps
Use preferential seating
INVOLVE PARENTS OR OTHER SIGNIFICANT ADULTS!

Particular suggestions for students with . . .

Learning disabilities

Use multisensory teaching strategies
Develop/improve social skills
Use color coding
Use markers to focus visual attention
Provide audio tapes for difficult reading material
Provide study guides
Provide graphic organizers

Mental retardation

Simplify the vocabulary
Select lessons that are developmentally as well as age appropriate
Present material in a concrete, "real life" manner, as possible
Use practice and repetition
Avoid "gray" areas in discussion, keep things as "black and white," as possible

Emotional disturbance

Emphasize social skills:
- self-control
- self-concept
- communication skills

Visual impairment

Use three-dimensional models whenever possible
Provide personal magnifiers, as appropriate
Provide materials in enlarged type
Provide materials in braille, as needed
Provide audio tapes of reading materials
Provide slant-boards, as needed
See that student is wearing prescription glasses or contact lenses, as needed
Have fellow student verbally describe what is being shown

Hearing impairment

Support use of hearing aides, when appropriate
Use appropriate amplification system
Provide lesson guides with key information written down
Repeat or restate students' questions and responses during class discussion
Write key points on overhead or chalkboard as the lesson progresses
Provide an interpreter
Have fellow student share his/her notes

Physical impairment

Provide individualized support in certain situations

HIV/AIDS Skill Checklist

HIV/AIDS skills	Activity no.
Understand that germs can spread to people from other people and from objects, animals, and through the air.	1
Define diseases caused by germs as communicable or contagious.	2
Understand that the germ that causes AIDS is a virus called HIV or Human Immunodeficiency Virus.	3
Identify specific ways that the AIDS virus is spread.	4-a, 4-b, 4-c, 4-d
Having sex with someone who is infected with the AIDS virus. Anal intercourse Oral intercourse Vaginal intercourse Having blood from an infected person mix with another person's blood. Sharing needles during drug use. Using unsterilized needles for piercing ears or tattooing. Touching a cut on one person's body to a cut on someone else's body. From a pregnant woman who is infected to her baby. Through a contaminated blood infusion (highly unlikely now that all transfused blood is screened).	
Describe/demonstrate methods of preventing transmission of HIV Abstaining from sexual intercourse. Using a latex condom and spermicide when having sexual intercourse. Never touching hypodermic needles that are found. Never sharing needles for drug use. Never sharing needles or using unclean needles for ear piercing or tattooing.	5-a, 5-b, 5-c
Understand that any type of person can get AIDS.	6
Describe how the immune system protects the body.	7
Describe how the HIV affects the immune system. Describe the difference between being HIV+ and having AIDS.	8
Understand that although scientists are working hard to find a cure for AIDS, none currently exists. Understand that people can die from AIDS.	9
Describe how people are tested for AIDS.	10
Identify people and organizations that will talk to people about AIDS.	11
Identify organizations that provide counseling and information about HIV/AIDS.	12

HIV/AIDS Skill Checklist (cont.)

Basic life skills	Activity no.
Demonstrate both verbal and nonverbal communication skills.	13
Identify causes of different feelings.	14
Describe appropriate ways of expressing and responding to feelings.	15
Identify appropriate person to share feelings with.	16
Identify high-risk situations.	17
Describe and apply decision-making steps.	18
Describe/demonstrate resistance skills.	19
Describe/demonstrate methods of avoiding high-risk situations.	20

PART 3: Sample Teaching Activities for Students With Special Needs

The lessons presented in this section of the guide are examples. They can be simplified and broken down into smaller steps or expanded to higher levels with more advanced vocabulary as necessary. In many cases they presume mastery of prerequisite skills. It may be appropriate to back up and review or reteach those skills, depending on the need of the student(s).

HIV/AIDS skills

Activity 1

Skill: Understand that germs can be spread to people from other people, objects, animals, and through the air.

Objective: Student will draw pictures that depict different ways germs can be spread.

Materials Needed: Drawing paper or poster board.

Description of Activity: Through the use of pictures, the teacher presents to students different ways germs can be spread (from other people, objects, animals, and through the air). Students then draw their own posters that depict these different ways.

Activity 2

Skill: Define diseases caused by germs as communicable or contagious.

Objective: After hearing a description of a disease, student will describe if it is either communicable (contagious) or noncommunicable (noncontagious).

Materials Needed: None.

Description of Activity: After introducing the concept of communicable/noncommunicable disease to students, the teacher reads short phrases to students. The students verbally complete the phrase related to the disease described in the phrase. Examples are presented below.

A cold is caused by a germ that is sometimes passed through the air.
It is a _____ disease.

Heart disease is sometimes caused by smoking or being overweight.
It is a _____ disease.

HIV is caused by a germ that can be passed from one person to another person by having sexual intercourse.
It is a _____ disease.

Activity 3

Skill: Understand that the germ that causes AIDS is a virus called HIV or Human Immunodeficiency Virus.

Objective: Student will understand that the germ that causes AIDS is a virus called HIV or Human Immunodeficiency Virus.

Materials Needed: Teacher-developed puzzle

Description of Activity: The teacher begins the activity by asking students if they have heard of the disease called AIDS. If none have heard of the disease, explain that it is a disease caused by a germ called a virus. If the students have heard of AIDS, then ask if they know the type of germ that causes AIDS. Explain that AIDS is caused by a type of germ called a virus. The virus is named HIV or Human Immunodeficiency Virus. Emphasize that they will soon learn the specific ways that HIV gets from one person to another, but thoroughly answer any questions or respond to comments that students may have. Conclude the activity by having students complete a crossword puzzle or word search puzzle that includes terms related to disease including HIV/AIDS.

Activity 4a

Skill: Identify specific ways that the virus that causes AIDS is transmitted.

Objective: Student will identify one way that HIV can be transmitted.

Materials Needed: None

Description of Activity: The teacher goes around the room and asks each student to name either a way that HIV can be spread or a way that it cannot be spread. An alternative to this activity is to read a true or false statement regarding transmission and ask students to respond.

Activity 4b

Skill: Identify specific ways that the virus that causes AIDS is spread.

Objective: Student will be able to distinguish between the ways HIV can be spread and ways that it cannot be spread.

Materials Needed: Index cards

Description of Activity: Before beginning the activity, the teacher writes on small sheets of paper or cards both the ways that HIV can be spread and the ways that it cannot be spread. Only one way will be written on each sheet or card. The cards are then placed in a box or in another type of container. The container should have an opening so that students can reach in and select a card. After the students have selected a card, they must identify whether or not it is a way of transmitting HIV.

Activity 4c

Skill: Identify specific ways that the virus that causes AIDS is spread.

Objective: After viewing pictures, the student will identify if the picture depicts a way of transmitting HIV.

Materials Needed: Poster board

Description of Activity: The teacher constructs posters that depict either a way that HIV can be spread or a way that it cannot be spread. The posters are shown one at a time to students. Students, either individually or together, respond whether or not the poster depicts a way of spreading HIV.

Activity 4d

Skill: Identify specific ways that the virus that causes AIDS is spread.

Objective: In response to different scenarios, student will identify the proper action relative to preventing the transmission of HIV.

Materials Needed: None

Description of Activity: The following scenarios can either be read to students, or the students can read them on their own. After hearing or reading the scenarios, students can respond in writing or verbally.

SCENARIO #1: Mark, Trevor, and Mary Ann have been involved in injecting drugs bought off the street. All of them know that this is a very dangerous habit. When they do inject the drugs, they share the same needle. Mary Ann is concerned about her drug use and goes to her older brother John for advice. What advice should John provide to Mary Ann?

SCENARIO #2: Ticia tells Jennifer that Tiffany, Ticia's sister, knows how to pierce ears. Ticia invites Jennifer to her house to get her ears pierced. Ticia says that Tiffany will be piercing three girls' ears that night. What advice would you give Jennifer?

SCENARIO #3: Ralph has heard that it is possible to get AIDS from getting a tattoo. He asks his friend Chester if this could be true. How should Chester answer Ralph?

SCENARIO #4: Mary and Josh know that to join the Warriors, they must become blood brothers with another member. They must mix blood from a cut on their finger with blood from a member's finger. Why would their friend Albert warn them not to do this?

SCENARIO #5: Jamal's grandfather is in the hospital and is going to have a blood transfusion. Jamal's friend Donald tells Jerome that people can get AIDS from blood transfusions. Jamal asks his mother about getting AIDS from blood transfusions. What information can Jamal's mother provide?

SCENARIO #6: Alicia tells Monica that she is having sex with her boyfriend without using a condom. Her boyfriend says that it is safe because they do not have sex very often. What advice would you give Alicia?

SCENARIO #7: Brian tells Jose that he does not need to use a condom when he has sex with his girlfriend because people can only catch AIDS from homosexuals. Jose tells Brian that he is wrong. What should Jose explain to Brian?

Note on Activities 5a–c

Activities 5–a, 5–b, and 5–c are designed to address the skill "Describe/demonstrate methods of preventing the transmission of HIV." These activities are based on the following methods of preventing transmission of HIV.

- Abstaining from sexual intercourse
- Using a latex condom with spermicide when having sexual intercourse
- Never touching hypodermic needles that are found
- Never sharing needles for drug use
- Never sharing needles or using unclean needles for ear piercing or tattooing
- Never letting your blood mix with the blood of another person

Activity 5a

Skill: Describe/demonstrate methods of preventing the transmission of HIV.

Objective: The student will identify specific reasons for abstaining from sexual intercourse.

Materials Needed: None

Description of Activity: This activity begins with a discussion of why adolescents/teenagers should abstain from sexual intercourse. The teacher emphasizes to students that abstaining or abstinence means not doing something. Abstaining from sex means not having sexual intercourse with anyone at any time. Depending on the ability of students, reasons can either be presented by the teacher or generated through student brainstorming. Reasons presented include:

- Pregnancy prevention.
- Prevention of sexually transmitted diseases (STDs), including HIV.
- Sexual intercourse may be contrary to personal or family values.
- Most teenagers are not ready for the mental, emotional, and social commitment of a relationship involving sexual intercourse.
- Some sexual activity may be a result of strong pressure.

After the students have reviewed the reasons, conduct a role play among students. The role play should involve a teenager asking a friend for advice about having sex with a boyfriend/girlfriend. The "advisor" should be encouraging the "advisee" to abstain from sexual intercourse. Reasons for abstaining should be included in the advice.

Activity 5b

Skill: Describe/demonstrate methods of preventing the transmission of HIV.

Objective: The student will identify the specific sequence for using a condom and spermicide effectively.

Materials Needed: Index cards, condom, model of male reproductive system (optional)

Description of Activity: The teacher prepares for the activity by describing the correct steps in using a condom and spermicide. If possible, the steps should be demonstrated using a model of the external parts of the male reproductive system. After this information is presented to students, several other activities can be conducted.

Activity #1: Working individually or in small groups, students are given small cards, each with a different step in the proper use of a condom. The student(s) place the cards in proper order on a desk or tabletop.

Activity #2: Working individually or in small groups, students develop a poster that clearly shows the steps in proper condom use.

Activity #3: Individually or in small groups, using a model of the external parts of the male reproductive system and a condom with spermicide, students demonstrate the appropriate use of a condom. If a model is unavailable, students can use fingers to demonstrate.

Activity 5c

Skill: Describe/demonstrate methods of preventing the transmission of HIV.

Objective: The student will identify specific actions to take in situations involving needles or other instruments that might draw blood injected into the body.

Materials Needed: None

Description of Activity: The teacher presents to students specific scenarios that describe situations in which students could come into contact with needles or other instruments that might contain blood. After the scenarios, students respond as to appropriate action either verbally or in writing. The students can develop responses either individually or in small groups. An alternative activity is to present the scenarios through role playing.

Scenario #1: While playing in a vacant lot, Marla sees what appears to be a needle like the kind that her doctor uses to give her a shot. Marla shows the needle to Anthony and asks him what they should do? What would you do?

Scenario #2: Scott has been lifting weights for 5 months but does not appear to be getting bigger or stronger. Several of his friends have occasionally started to shoot steroids to "bulk up." The friends share a needle to inject the steroids. One of the boys, Jason, wants Scott to shoot up with them. Jason tells Scott that the steroids can only help him get bigger and stronger. What should Scott do? Why?

Scenario #3: Sam has moved to a new neighborhood. He has met several new friends whom he really likes. Marcus tells him that all the guys who hang out are "blood brothers". The friends become blood brothers by cutting their thumbs with a knife and holding thumbs together to mix their blood. Sam doesn't think this is a good idea. What should he do?

Scenario #4: Tanya wants to get her ears pierced. Her friend from school, Rebecca, has an older sister, Molly, who pierces ears at their home. Rebecca wants Tanya to come to her house to get her ears pierced. What should Tanya do?

Activity 6

Skill: Understand that any type of person can get AIDS.

Objective: After hearing descriptions of different people, the student will indicate that any person can get AIDS.

Materials Needed: Poster board

Description of Activity: Before the activity, the teacher constructs posters, each containing a picture of a different person. The posters should feature a diverse group of people representing different ethnic and racial groups, different socioeconomic levels, different living conditions, and varied ages. The teacher holds each poster up to the class and asks the students if this person can become infected with HIV. After the teacher reinforces the concept that anyone can become HIV positive, students, individually or in groups, can develop posters that express this idea. This activity can include a discussion of how each of the people in the posters might become HIV positive.

Activity 7

Skill: Describe how the immune system protects the body.

Objective: The student will describe how T-cells in the immune system destroy germs in the body.

Materials Needed: Poster board

Description of Activity: The teacher introduces the concept of T-cells by describing them as guards or protectors of the body from germs. A drawing or a poster is put on the chalkboard showing how one T-cell engulfs a germ and eventually destroys it. Several students are then designated as a T-cell and surround one student who is a germ. Students can follow this demonstration by developing a poster that depicts this scenario.

Activity 8

Skill: Describe how HIV affects the immune system. Describe the difference between being HIV+ and having AIDS.

Objective: The student will describe how HIV affects T-cells in the immune system and the difference between a person being HIV positive and having AIDS.

Materials Needed: Plastic egg, marshmallows or M&Ms, poster board

Description of Activity: The teacher begins the activity by explaining to students that HIV infection affects the immune system by destroying the ability of the immune system's T-cells to destroy germs. When enough damage has been done, germs that normally would not cause problems to the body are not destroyed and make people very sick. When this happens, a person is no longer just infected with HIV but is now sick with AIDS. To demonstrate the damage that HIV does to T-cells, the teacher uses a plastic egg that opens into two pieces (often sold as Easter eggs) and small marshmallows or M&Ms. Before the demonstration, the teacher places marshmallows or M&Ms in the larger of the two pieces of the egg and then closes the egg. One marshmallow or M&M is kept outside of the closed egg. The teacher begins the demonstration by reminding students that HIV destroys T-cells. The teacher holds up the single M&M or marshmallow and asks students to think of this as a single HIV. Then the teacher carefully opens the egg so that students do not see the other marshmallows or M&Ms. The teacher then explains to students that the single HIV enters a T-cell and, once inside, begins to multiply. Place the single piece into the egg and close it. The teacher further explains to students that after the HIV multiplies inside the T-cell, the T-cell is destroyed. At this point, the teacher opens the egg and allow the pieces to spill out, showing that HIV actually breaks apart the T-cell. This activity is followed by asking students to construct a poster (or two posters) that show how HIV affects the immune system and how it can result in AIDS.

Activity 9

Skill: Understand that, although scientists are working hard to find a cure for AIDS, no cure exists and people can die from AIDS.

Objective: Student will verbally, or in writing, acknowledge that, although scientists are working hard to find a cure, no cure for AIDS exists.

Materials Needed: Media reports on AIDS research

Description of Activity: Media—television, magazines, and newspapers—often present information on AIDS research. The teacher presents either a videotape of television coverage related to AIDS research or a magazine or newspaper article. The teacher shows the videotape to the students or, in the case of an article, reads or has the students read the article. The follow-up to this activity can be as basic as having students verbally respond to questions about the concept or as involved as having students write letters to the editor or an elected official regarding HIV/AIDS treatment.

Activity 10

Skill: Describe how people are tested for AIDS.

Objective: The student will identify a blood test as the test for HIV.

Materials Needed: None

Description of Activity: The teacher briefly explains to students that the presence of HIV can be confirmed only through a blood test. Students then respond to a series of true/false statements regarding HIV testing. Some examples of statements are listed below:

- A person who is HIV+ can be identified because he or she looks tired and thin.
- To check if a person is infected with HIV, a doctor will give a chest x-ray.
- A special blood test can be used to identify if a person is HIV+.
- By listening through a stethoscope a doctor can tell if a person is infected with HIV.

Activity 11

Skill: Identify individuals and organizations that will talk to people about AIDS.

Objective: The student will identify individuals and organizations that will talk to people about AIDS.

Materials Needed: None

Description of Activity: The teacher begins this activity by brainstorming with students about who individual students could talk to about AIDS. Students may want to talk to someone about their concerns or worries about AIDS. Individuals who may be identified by students include parents, grandparents, older brothers or sisters, church leaders, community leaders, teachers, and guidance counselors. The teacher should provide examples of individuals not identified by students. The following scenarios can then be presented by the teacher. Based on the scenario, students can suggest possible sources of advice or information.

Scenario #1: Marlon is very sad because one of his mother's best friends is very sick with AIDS. Because of the friend's illness, Marlon's mother is often upset at home and spends a lot of time at the hospital. Who might Marlon be able to talk to?

Scenario #2: A new girl, Rebecca, has moved into Jennifer's neighborhood. Jennifer likes Rebecca and enjoys hanging out with her. Rebecca's mother calls Jennifer's father to tell him that Rebecca is HIV+. Jennifer and her father would like to talk to someone to find out if she needs to follow any special rules when she plays with Rebecca.

NOTE: Other scenarios can be developed that are appropriate for students.

Activity 12

Skill: Identify organizations that provide resources for counseling and information about HIV/AIDS.

Objective: The student will identify organizations that provide counseling and information about HIV/AIDS.

Materials Needed: List of appropriate community agencies, poster board

Description of Activity: The teacher explains to students that certain organizations in the community can provide counseling and information about HIV/AIDS. Prior to the activity the teacher should develop a list of those organizations. The organizations can then be presented to students. Working cooperatively, students can develop information posters that list the organizations, addresses, and telephone numbers. The posters can then be displayed in the classroom and in other areas in the school. An alternative or extension to the posters could be developing wallet-size cards listing community organizations. This can be done by providing blank cards or having students cut cards from poster board. Finished cards, which include the appropriate information, can then be laminated, and students can be encouraged to keep the laminated cards in their wallets.

Basic life skills

Activity 13

Skill: Demonstrate both verbal and nonverbal communication skills.

Objective: Given a specific situation, the student will demonstrate how a person may communicate both verbally and nonverbally in that situation.

Materials Needed: None, or well-chosen pictures showing people communicating nonverbally

Description of Activity: The teacher introduces the activity by explaining to students that people can express themselves both verbally (by saying things) and nonverbally (not saying anything but making a face or pointing, etc.). (If available, show clear pictures of people communicating nonverbally.) The teacher then asks students for examples of ways they know of that people communicate nonverbally. After students provide examples, explain that the class will now demonstrate some ways people communicate nonverbally. Present the following situations to students, and have individual students demonstrate the appropriate nonverbal communication.

- Someone asks you, "Where is the light switch?"
- Your teacher tells you your classwork during the last 3 weeks has been excellent.
- You are looking out the window and want to say hello to your friend who sees you from the sidewalk.
- A friend tries to get you to do something that is against the law.
- Your boyfriend/girlfriend tries to talk you into having sex. You definitely do not want to have sex.

After students respond to the situations above, explain to the class that people often combine verbal communication with nonverbal communication. This often adds more meaning or emphasis to the message. Go back through the same situations a second time using a role play with two students. One of the students in the role play will use both verbal and nonverbal communication to respond.

NOTE: The situations described above are provided only as examples for teachers. Teachers may want to identify other situations that will be appropriate for students.

Activity 14

Skill: Identify different feelings. Identify causes of different feelings.

Objective: After reviewing vignettes of different emotions, the student will first identify the emotion displayed and then identify possible causes of the feelings.

Materials Needed: None

Description of Activity: The teacher identifies or develops several vignettes displaying specific emotions. Possible sources for the vignettes are children's literature, videos that the teacher has on hand, or real-life situations. In this activity the students observe short vignettes involving either students or adults displaying specific emotions—happiness, sadness, anger, fear. Situations that students may find themselves in related to a risk of HIV/AIDS transmission can be presented. For higher functioning students, emotions such as jealousy, embarrassment, and disappointment can be portrayed. After reviewing each vignette, the teacher may ask the following questions:

- How did that person feel?
- How many of you have ever felt _____?
- Is it okay to feel _____?
- What did that person do when she felt _____?
- Is there another way that person could have expressed _____?
- What are some things that make you feel _____?
- When this happens, what do you do?

As with all activities dealing with feelings, it is important to let students know that it is okay to be angry, sad, afraid, etc. However, it is important for students to learn to express feelings in an appropriate manner. It is not necessary to ask all of the follow-up questions. Ask only those appropriate to your students.

Activity 15

Skill: Describe appropriate ways of expressing and responding to feelings.

Objective: Given a specific situation, the student will identify the feeling or emotion evoked by the situation and identify an appropriate behavioral response to that feeling.

Materials Needed: None

Description of Activity: The teacher reads the situations below to students and asks students how they would feel and how they would respond. Encourage different students to identify their feelings and responses to each situation. Discuss the appropriateness of each response.

Situations:
1. Your teacher tells you that your picture is beautiful and will be displayed on the bulletin board.
2. On purpose, someone knocks your books to the floor and runs away.
3. You find out you will be going on a nice vacation.
4. You make a mistake in class and other students laugh at you.
5. Someone calls you a "stupid retard."
6. You ask someone to dance and he/she refuses.
7. A neighbor who was a good friend dies.
8. You win a trophy.
9. You need directions, and someone tells you to read them on a sign.
10. Other students tell you that you are in the "dummy" class.
11. Your boyfriend/girlfriend says that if you really care, you will have sex with him/her.
12. Some of the kids that you hang out with call you a "scared little kid" because you won't shoot drugs.

Situations should be tailored to the age level, functioning level, and personal situations of your students. The activity can be reinforced by practicing role playing and then videotaping it. Students can also view the videotape and discuss responses.

Activity 16

Skill: Identify appropriate persons to share feelings with.

Objective: Given a specific situation evoking certain feelings, the student will identify someone they would discuss those feelings with.

Materials Needed: None

Description of Activity: After reading to the students specific situations, such as those in Activity 10, the teacher will ask students to identify with whom the students could share their feelings. Allow the students the option of public identification of significant others. Identify significant people in the school setting (teachers, counselors, etc.) who may be possible listeners. Possible listeners outside the school setting might be parents, other significant adults, family members, doctors, clergy, and hotline staff. Any organization identified in Activity 12 could be included. A logical follow-up activity is to have students role play the phone calls to the appropriate persons or organizations.

Activity 17

Skill: Identify high-risk situations.

Objective: Student will be able to identify situations as "High Risk," "Some Risk," or "Risk Free."

Materials Needed: Wall signs (8 1/2 x 11) that read "High Risk," "Some Risk," and "Risk Free." Behavior cards (8 1/2 x 11) that read:

Risk Free	Some Risk	High Risk
dry kissing	French kissing	unprotected anal sex
massage	mutual masturbation	unprotected vaginal sex
abstinence	unprotected oral sex	needle sharing for drugs
fantasizing	cleaning blood without gloves	ear piercing with shared needles
self masturbation	sharing needle that has been cleaned with bleach	using shared needle that has been cleaned with water
hugging	using latex condems properly	tattooing with shared needle
donating blood	blood transfusions*	reusing the same condom every time
		breast feeding by infected mom

*Today it is highly unlikely that one will become infected with HIV this way because all transfused blood is screened.

Description of Activity: The teacher places the wall signs on the wall—"Risk Free" to the far left, "Some Risk" in the middle, and "High Risk" to the far right. The behavior cards are then distributed, and each student places a card, using tape, along the continuum at the place where he or she thinks it belongs. Once all the cards have been placed, the teacher leads a discussion, card by card, asking whether the students agree or disagree with the placement. Cards may be moved as needed

NOTE: Some of the words listed as behaviors (abstinence, fantasizing, masturbation) may be too difficult for some students to understand. If this is the case, simpler descriptions that students will understand need to be substituted (such as abstinence/not having sex, fantasizing/thinking about having sex, masturbation/touching self). Also, many students with special needs have difficulty dealing with "gray" areas such as "Some Risk" and may need to sort behaviors into "Risky" (not OK to do), or "Risk Free" (OK to do) categories.

Activity 18

Skill: Describe and apply decision-making steps.
1. decide on a goal
2. consider options
3. understand the consequences of each option
4. choose the best option
5. make a plan
6. carry out the plan

Objective: Given a particular social situation, the student will be able to use the six-step process in making a decision.

Materials Needed: Appropriate videotapes of various situations related to decision making and saying "no" to risky behaviors. Students' own experiences can also be used.

Some suggested videotapes include those listed below.

"Yes? No? Maybe?: Decision-Making Skills" (Grades 5–9), Sunburst Communications, 39 Washington Avenue, P.O. Box 40, Pleasantville, NY 10570-0040

"The Tough Decisions: How to Make Them" (Grades 9–12), Sunburst Communications, 39 Washington Avenue, P.O. Box 40, Pleasantville, NY 10570-0040

"I Don't Know What to Do" (Grades 7–12), ETR Associates, P.O. Box 1830, Santa Cruz, CA 95061-1830

Description of Activity:
This is an overview of at least six different skills and lessons. The teacher guides discussions and activities such as role playing to practice each of the steps. The steps are reviewed and related at each lesson. The following open-ended questions can be helpful in guiding this discussion:

1. What would you like to happen?
2. What have you tried? What have you thought of doing? What else could you try?
3. What might happen if you _____?
4. Which one of the ideas seems like the best thing to try?
5. What's your plan? (How? When? Where? With whom? To whom?)
6. If it doesn't work, what else could you try?

Example: You decide that you want to go to a school dance with your friends. You are invited to go with a person you like and would like to get to know better, but that person often does things that you are not comfortable with. Some of your options are:
1. not to go at all
2. go by yourself
3. suggest that you both go with a group
4. tell the person how you feel

The consequences might be:

1. If you don't go, you'll miss the fun.
2. If you go by yourself, you'll feel awkward.
3. If you suggest going with a group, the person might not be interested.
4. If you tell the person how you feel, the person might respond positively.

Activity 19

Skill: Demonstrate/describe resistance skills.

Objective: The student will demonstrate specific resistance skills through role playing scenarios.

Materials Needed: None.

Description of Activity: Teacher introduces the activity by stating that sometimes people find themselves in situations in which they are pressured to do things that they do not want to do. Students are then asked if they can identify any time that someone pressured them to do something. Ask individual students how they responded. Next explain to students that there are specific ways to respond in these situations in order to refuse to do something.

After the previous information has been discussed with students, the teacher is now ready to begin to work on skill development with students. The following methods are possible ways students can respond to pressure.

- Repeat over and over again in a strong voice, "No, I will not do that."
- Give a good reason why you will not do something.
- State clearly that you will not do something, and then attempt to change the subject.
- Leave the scene.

To begin the skill-building segment of the activity, the teacher clearly describes the refusal methods, presented above, to the students. Emphasize to the students the importance of not only clearly verbalizing a "no" response, but even making it stronger by using nonverbal language. Then either the teacher or a student demonstrates the methods listed above. Demonstrate the technique using scenarios that are meaningful to the students. After the demonstration, ask for students to volunteer to practice the skill. Use scenarios other than those used in the demonstrations. Have the students, with partners, practice the skills using even more scenarios.

Scenarios should be appropriate to the students' real life decisions. An important key to teaching is to both demonstrate and provide time for practice. Practice should include each of the four methods presented above.

Activity 20

Skill: Describe/demonstrate methods of avoiding high-risk situations.

Objective: Student will identify possible risky situations and describe ways of avoiding them.

Description of Activity: Introduce the activity by emphasizing to students that certain things that people do or certain places where people "hang out" can put them at risk of being hurt. Ask students if they can identify any of these types of behaviors or situations. Be prepared to provide examples. Explain to students that often these situations can be avoided. Role play the scenarios below, asking students to demonstrate appropriate avoidance behaviors.
Possible Scenarios:

SCENARIO #1: Tiffany invites Susan to come to her house to get her ears pierced. She has invited other friends as well. How should Susan respond?

SCENARIO #2: Allison invites Rebecca to a party at her house on Friday evening. Allison says that many of the kids from school will be at the party and some of them will be bringing beer.

SCENARIO #3: Renaldo is with his girlfriend and other friends at the school dance. He notices Ralph and some other boys approaching the group. Renaldo knows that Ralph will invite him and his girlfriend to a party where there is no adult supervision.

SCENARIO #4: Michael has just asked Shannon to dance at the afterschool dance. Shannon enjoys dancing with Michael. Twice after dances Michael has invited Shannon to his house. Both times Michael put pressure on Shannon to "make out" with him. Shannon did not like Michael pressuring her.

PART 4: Resources and References

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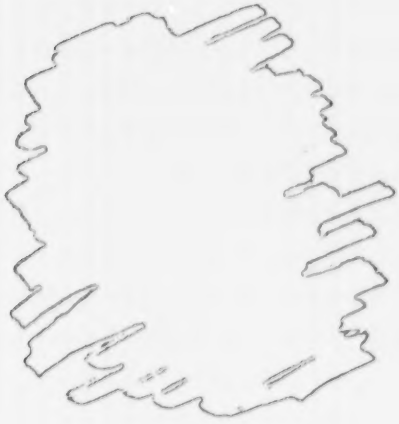

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